der Irren, Arch. f. Psych., x., 2.—Monakow, Zur pathologischen Anatomie der Bleilähmung und der saturnine Encephalopathie, Ibid.—Takacz, Untersuchungen ueber die Verspätung der Empfindungsleitung, Ibid.—Racine, Ein Fall von acuter (primärer) spontaner Rückenmarkserweichung, Ibid.

b.—PATHOLOGY OF THE NERVOUS SYSTEM AND PATHOLOGICAL ANATOMY.

HEAD SYMPTOMS WITH TRANSITORY PARALYSIS IN CHILDREN, FOLLOWED BY PERMANENT DEAFNESS .- Dr. A. Seeligmüller, Centralbl. f. Nervenheilkunds. March, gives an account of two cases of children, aged 3 and 4 years respectively, who were suddenly seized with high fever, delirium, headache, etc., and who, after the subsidence of the more acute symptoms, were found more or less paraplegic and deaf. The motor symptoms in one case were as follows: The child could move his limbs in all directions with considerable force, the faradic and sensory reactions were apparently normal, but he could neither walk nor stand. The patellar reflex was lacking, but tickling the sole of the foot produced the usual contractions. Sensibility was apparently normal: nothing abnormal in the spinal cord, except an apparent sensitiveness of the dorsal vertebræ. In a few months power of the limbs was completely restored, but deafness was persistent and complete. The other case, when seen a month after the first attack, could walk with support, but was unsteady, stood with his limbs wide apart, though it had not the appearance of vertigo, and his gait was about the same with the eyes closed or open. Electric reaction, reflexes, and sensation were normal; the bodily functions all right. A few days later the motor symptoms had much improved. The deafness was complete.

Similar histories have been given by Voltolini, Toynbee, and Von Tröltsch. The latter author had attributed it to a localized lesion in the fourth ventricle, but Seeligmüller rejects this explanation, since in both of his cases he found no sugar in the urine, and there was no increase in its quantity. The exact pathology of the condition cannot be determined until a fatal case affords an autopsy, an event that has not as yet occurred.

THE NERVOUS SYMPTOMS OF DYSPEPSIA.—At the session of the Societé de Biologie, April 3, M. Leven offered a communication, of which the following abstract is reported in the Gaz. des Hopitaux, No. 40:

Physiological experiment has demonstrated that relations exist between the brain and stomach. Lesions in the thalami, the crura, the upper part of the cord, or section of the trigeminus within the cranium, are sufficient to cause certain disorders of the stomach. Schiff rightly concludes that this cerebral influence is transmitted via the pneumogastrics.

M. Leven has been able to clinically observe the action of dyspepsia on the cord and brain. The nervous disorders due to dyspepsia are of two kinds: Disorders of sensibility and vaso-motor troubles. causes of sexual exhaustion can be relieved, and many, if not the majority, can in time be substantially cured.

THE following are the titles of some of the recently published papers on the Pathology of the Nervous System and Mind, and Pathological Anatomy: FOLSOM, Cases of Insanity and Fanaticism, Bost. Med. and Surg. Jour., Mar. 18.—Channing, The Study of Psychological Medicine, Ibid., Apr. 1.— CROTHERS, Cerebral Trance, or Loss of Consciousness and Memory in Incbriety, Quart. Jour. of Incoriety, Jan., 1880.—Fisher, Insane Drunkards— Their Medico-Legal Relations, Ibid.—ARNOLD, Chronic Tobacco Inebriety, Ibid. - HILL, Nervous and Neuralgic Affections Symptomatic of Defect of the Eye, Med. & Surg. Reporter, Apr. 8. - CATTANI, The Localization of Lesions in the Tempora-Sphenoidal Lobe of the Brain, Gaz. degli Ospitali, March 15.—Angear, Consumption a Nerve Disease, St. Louis Med. and Surg. Jour., Apr. 5.-Mulhall, Hysterical Cough, Ibid.-WHITTAKER, Facial Paralysis, Cin. Lancet and Clinic, May 22 .-DAVY, St. Vitus' Dance and Kindred Affections, Ibid.—Ball, De la Folie Circulaire, La France Méd., Nos. 32 and 33.—Spitzka, On the Scientific Necessity for a Clinical Demarcation of the Various Forms of Insanity, The Med. Gazette, May 15.—Gray, L. C., A Case of Paralysis of the Four Extremities and the Muscles of the Trunk Due to Myelit's of the Anterior Cornua of the Spinal Cord, Proc. Med. Soc. Co. Kings, May, 1880.—BEARD, Nervous Diseases connected with the Male Genital Function, N. Y. Med. Record, May 8.—EGER, Beitrag zur Pathologie des Morbus Basedowi, Deutsche med. Wochenschr., No. 13, Mar. 27.-Cassels, Report of a Fatal Case of "Gunshot" Wound of the Head, Canada Med. Rec., May.-WIL-KINS, Case of Spinal Apoplexy, Ibid.—HELM, Spinal Meningitis, Cincinnati Lancet and Clinic, June 5.—MITCHELL, Clinical Notes on Duchenne's Disease, Phil. Med. Times, May 22.—Beates, Insanity of Lactation, Med. & Surg. Rep., May 15.—LAGARDELLE, The Diagnosis of Manie Grave, Jour. de Med. de Bordeaux, Apr. 24.—Beach, On Cases of Athetosis, Brit. Med. Jour., June 12.—Bradford, Two Cases of Paralytic Affections in Children, with Remarks, N. Y. Med. Jour., July .- Mattison, A Remarkable Case of Chloral and Chloroform Inebriety, Proc. Med. Soc. Co. of Kings, July .- DE WATTE-VILLE, On Facial Paralysis from Cold, with Special Reference to its Prognosis, Practitioner, May .- SAN MARTIN, Paralisis Agitante, Cronica Med. Quirurg. de la Habana, May.—SAYRE, On Some Disorders Dependent upon Genital Irritation, Med. News and Abstract, June.-Beverly Robinson, On Various Forms of Functional Cardiac Disturbances, N. Y. Med. Rec., June 26 .- HAYDEN, Certain Varieties of Cardiac Neurosis, Brit. Med. Jour., June 5.—Galvagni, Sugli Spasmi Ritmici Localizzati, Rivista Clinica di Bologna, Jan.—Arnold, Insanity Occurring in the Puerperal State, Maryland Med. Jour., June 15 .- MENDEL, Ueber Anfalle von Einschlafen, Deutsche med. Wochenschr., May 15.—CATTANI, Due Casi di Lesione Cerebellare, Gazetta degli Ospitali, Apr. 80.—Barreggi, Casa di Emorragia Sottoaracnoidea della probabile Durata di circa un Anno con sordita completa di Lesione corticale e morte per Emorragia cerebrale, Ibid., May 15.-MAURIAC, Contribution á l'etude de la Syphilis Cerebrale, Jour de Médecine de Bordeaux, Feb. 28.